

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Connecticut Republican SCC

ADDRESS (number and street)

321 Ellis Street

Bldg 17 Unit 501

☐Check if different  
than previously  
reported. (ACC)

New Britain

CT

06051

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00023838

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☒

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of(d) 30-Day  
Post -Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

08

01

2010

through

08

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

-Jerry Labriola, Jr.

Signature of Treasurer

Electronically Filed by -Jerry Labriola, Jr.

Date

10

20

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name  
Connecticut Republican SCC

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	39901.55
(b) Cash on Hand at Beginning of Reporting Period .....	128296.86	
(c) Total Receipts (from Line 19) .....	38718.12	607740.98
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	167014.98	647642.53
7. Total Disbursements (from Line 31) .....	68262.98	548890.53
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	98752.00	98752.00
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	43751.21	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Connecticut Republican SCC

Report Covering the Period:

From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	2350.00	356653.28
(ii) Unitemized .....	1571.00	106007.21
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	3921.00	462660.49
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	1500.00	63630.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	5421.00	526290.49
12. Transfers From Affiliated/Other Party Committees .....	32600.00	72770.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	697.12	8680.49
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	38718.12	607740.98
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	38718.12	607740.98

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	3794.60	50171.44	
(ii) Non-Federal Share.....	14274.93	188740.66	
(b) Other Federal Operating Expenditures.....	15784.99	206997.79	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	33854.52	445909.89	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	5000.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	34408.46	97980.64	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	34408.46	97980.64	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	68262.98	548890.53	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	53988.05	360149.87	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	5421.00	526290.49
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5421.00	526290.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	19579.59	257169.23
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	697.12	8680.49
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	18882.47	248488.74

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 39

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A.**

Full Name (Last, First, Middle Initial)

William E. Curran Jr.

Mailing Address 401 Temple Street

City

New Haven

State

CT

Zip Code

06511-6801

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	1	0

Transaction ID: 00827.C152508

Amount of Each Receipt this Period

1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Donald R. Frahm

Mailing Address 145 Deercliff Road

City

Avon

State

CT

Zip Code

06001-2852

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	2		2	0	1	0

Transaction ID: 00802.C152456

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

J. Thomas Macy

Mailing Address 136 Quonnipaug Lane

City

Guilford

State

CT

Zip Code

06437-1103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	2		2	0	1	0

Transaction ID: 00802.C152455

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

1350.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A.**

Full Name (Last, First, Middle Initial)

Peter Busch Orthwein

Mailing Address 154 Guards Road

City

Greenwich

State

CT

Zip Code

06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Thor Industries Inc

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 7 / 2 0 1 0

Transaction ID: 00827.C152506

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

2350.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 39

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A.**

Full Name (Last, First, Middle Initial)

Dominion PAC - F

Mailing Address One James River Plaza, 20th Floor  
P.O. Box 26666

City	State	Zip Code
Richmond	VA	23261

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	1	0

Transaction ID: 00811.C152482

Amount of Each Receipt this Period

1500.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

1500.00

TOTAL This Period (last page this line number only) .....

1500.00



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 39

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A.**

Full Name (Last, First, Middle Initial)

Republican National Committee

Mailing Address Tim Morgan, Treasurer  
310 First St., N.W.

City	State	Zip Code
Washington	DC	20015-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Republican National Commi-  
tee

Occupation

Receipt For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

69220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	1	0

Transaction ID: 00816.C152492

Amount of Each Receipt this Period

32600.00

Transfers From Affil./Aut-  
h.

SUBTOTAL of Receipts This Page (optional) .....

32600.00

TOTAL This Period (last page this line number only) .....

32600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 39

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A.**

Full Name (Last, First, Middle Initial)

Michael Argento

Mailing Address 726 Woodward Avenue

City

New Haven

State

CT

Zip Code

06512-1944

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ct Republicans

Occupation

Office Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2305.36

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: 00812.C152486

Amount of Each Receipt this Period

142.12

Offsets to Operating Expe-  
nditu

NOTE:Med. Ins. Emp. CoPay

**B.**

Full Name (Last, First, Middle Initial)

Michael Argento

Mailing Address 726 Woodward Avenue

City

New Haven

State

CT

Zip Code

06512-1944

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ct Republicans

Occupation

Office Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2447.48

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 6 / 2 0 1 0

Transaction ID: 00827.C152510

Amount of Each Receipt this Period

142.12

Offsets to Operating Expe-  
nditu

NOTE:Med. Ins. Emp. CoPay

**C.**

Full Name (Last, First, Middle Initial)

Christopher C. Healy

Mailing Address 27 Dorchester Road

City

Wethersfield

State

CT

Zip Code

06109-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ct Republicans

Occupation

Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3122.56

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: 00812.C152487

Amount of Each Receipt this Period

191.94

Offsets to Operating Expe-  
nditu

NOTE:Med. Ins. Emp. CoPay

**SUBTOTAL** of Receipts This Page (optional) .....

476.18

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 39

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A.**

Full Name (Last, First, Middle Initial)

Christopher C. Healy

Mailing Address 27 Dorchester Road

City

Wethersfield

State

CT

Zip Code

06109-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ct Republicans

Occupation  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3314.50

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 6 / 2 0 1 0

Transaction ID: 00827.C152511

Amount of Each Receipt this Period

191.94

Offsets to Operating Expe-  
nditu

NOTE: Med. Ins. Emp. CoPay

**SUBTOTAL** of Receipts This Page (optional) .....

191.94

**TOTAL** This Period (last page this line number only) .....

668.12

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Connecticut Republican SCC

<b>A.</b> Full Name (Last, First, Middle Initial) Blast Off Carpet Cleaning Mailing Address P.O. Box 3312	<b>Transaction ID:</b> 00812.E17527 <b>Date of Disbursement</b> <div> <div>08</div> <div>03</div> <div>2010</div> </div>
City Enfield State CT Zip Code 06083-3312 Purpose of Disbursement Carpet Cleaning Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>265.00</div> <b>CARPET CLEANING</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Cablevision Mailing Address 1111 Stewart Avenue City Bethpage State NY Zip Code 11714-3581 Purpose of Disbursement Utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 00818.E17556 <b>Date of Disbursement</b> <div> <div>08</div> <div>17</div> <div>2010</div> </div> <b>Amount of Each Disbursement this Period</b> <div>163.69</div> <b>UTILITIES</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Campaign Solutions Mailing Address 117 N. Saint Asaph Street City Alexandria State VA Zip Code 22314- Purpose of Disbursement Service Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 00812.E17529 <b>Date of Disbursement</b> <div> <div>08</div> <div>06</div> <div>2010</div> </div> <b>Amount of Each Disbursement this Period</b> <div>256.75</div> <b>SERVICE FEE</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**685.44**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A.**

Full Name (Last, First, Middle Initial)

Campaign Solutions

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement

Website Maintenance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 00812.E17532

Date of Disbursement

08 / 09 / 2010

Amount of Each Disbursement this Period

375.00

WEBSITE MAINTENANCE

**B.**

Full Name (Last, First, Middle Initial)

Elavon

Mailing Address 7300 Chapman Highway

City Knoxville State TN Zip Code 37920-

Purpose of Disbursement

Service Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 00812.E17525

Date of Disbursement

08 / 03 / 2010

Amount of Each Disbursement this Period

193.65

SERVICE FEE

**C.**

Full Name (Last, First, Middle Initial)

FLS Connect LLC

Mailing Address 7300 Hudson Blvd. Suite 270

City Saint Paul State MN Zip Code 55128-

Purpose of Disbursement

Telemarketing-PARTY Fundraising

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 00827.E17577

Date of Disbursement

08 / 20 / 2010

Amount of Each Disbursement this Period

3951.95

TELEMARKETING-PARTY FUNDRAISING

**SUBTOTAL** of Disbursements This Page (optional) .....

4520.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Connecticut Republican SCC

**A.**

Full Name (Last, First, Middle Initial)  
John V. Turk PEFAWASO LLC

Mailing Address 1515 Black Rock Turnpike

City Fairfield State CT Zip Code 06825-

Purpose of Disbursement  
Rent

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

**Transaction ID:** 00827.E17590

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

RENT

**B.**

Full Name (Last, First, Middle Initial)  
JP-Cos Cob LLC

Mailing Address 26 Arcadia Road

City Old Greenwich State CT Zip Code 06870-

Purpose of Disbursement  
Rent and Utilities

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

**Transaction ID:** 00827.E17587

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2333.00

RENT AND UTILITIES

**C.**

Full Name (Last, First, Middle Initial)  
Elizabeth M. Kurantowicz

Mailing Address 244 Griswold Drive

City W Hartford State CT Zip Code 06119-

Purpose of Disbursement  
EXPENSE REIMBURSEMENT:SEE BELOW

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

**Transaction ID:** 00818.E17553

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1422.30

EXPENSE REIMBURSEMENT:SEE  
BELOW

**SUBTOTAL** of Disbursements This Page (optional) .....

6755.30

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A.** Full Name (Last, First, Middle Initial)  
Marriott Kansas City Downtown

Mailing Address 200 W. 12th Street

City State Zip Code  
Kansas City MO 64105-

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 00818.E17562

Date of Disbursement

/   /

Amount of Each Disbursement this Period

505.60

**[MEMO ITEM]**

MEMO: LODGING

**B.** Full Name (Last, First, Middle Initial)  
Southwest Airlines

Mailing Address Bradley Airport

City State Zip Code  
Windsor Locks CT 06096-

Purpose of Disbursement  
Airfare

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 00818.E17563

Date of Disbursement

/   /

Amount of Each Disbursement this Period

462.80

**[MEMO ITEM]**

MEMO: AIRFARE

**C.** Full Name (Last, First, Middle Initial)  
Southwest Airlines

Mailing Address Bradley Airport

City State Zip Code  
Windsor Locks CT 06096-

Purpose of Disbursement  
Airfare

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 00818.E17567

Date of Disbursement

/   /

Amount of Each Disbursement this Period

341.40

**[MEMO ITEM]**

MEMO: AIRFARE

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

<b>A.</b> Full Name (Last, First, Middle Initial) S+T Associates	<b>Transaction ID:</b> 00812.E17534 <b>Date of Disbursement</b>																				
Mailing Address 40 Post Office Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	9		2	0	1	0												
City Enfield State CT Zip Code 06082-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Utilities	<table border="1"> <tr> <td>229.61</td> </tr> </table>	229.61																			
229.61																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
UTILITIES																					
<b>B.</b> Full Name (Last, First, Middle Initial) S+T Associates	<b>Transaction ID:</b> 00827.E17589 <b>Date of Disbursement</b>																				
Mailing Address 40 Post Office Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	6		2	0	1	0												
City Enfield State CT Zip Code 06082-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Rent	<table border="1"> <tr> <td>900.00</td> </tr> </table>	900.00																			
900.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
RENT																					
<b>C.</b> Full Name (Last, First, Middle Initial) Staples Inc	<b>Transaction ID:</b> 00827.E17584 <b>Date of Disbursement</b>																				
Mailing Address P. O. Box 182378	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	7		2	0	1	0												
City Columbus State OH Zip Code 43218-2378	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement General Office Supplies	<table border="1"> <tr> <td>732.15</td> </tr> </table>	732.15																			
732.15																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
GENERAL OFFICE SUPPLIES																					

**SUBTOTAL** of Disbursements This Page (optional) .....

1861.76

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 39

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A.**

Full Name (Last, First, Middle Initial)

W.B. Mason Co. Inc.

Mailing Address P.O. Box 111

City  
Brockton

State  
MA

Zip Code  
02303-0111

Purpose of Disbursement  
General Office Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 00827.E17592

Date of Disbursement

/   /

Amount of Each Disbursement this Period

181.68

GENERAL OFFICE SUPPLIES

**B.**

Full Name (Last, First, Middle Initial)

Wooster Square Development Corporation

Mailing Address 30 Germantown Road

City  
Danbury

State  
CT

Zip Code  
06810-

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 00812.E17536

Date of Disbursement

/   /

Amount of Each Disbursement this Period

750.00

RENT

**C.**

Full Name (Last, First, Middle Initial)

Wooster Square Development Corporation

Mailing Address 30 Germantown Road

City  
Danbury

State  
CT

Zip Code  
06810-

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 00827.E17588

Date of Disbursement

/   /

Amount of Each Disbursement this Period

750.00

RENT

**SUBTOTAL** of Disbursements This Page (optional) .....

1681.68

**TOTAL** This Period (last page this line number only) .....

15504.78

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

<b>A.</b> Full Name (Last, First, Middle Initial) Advantage Payroll Service Mailing Address P.O. Box 12020	<b>Transaction ID:</b> 00812.E17538 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	2		2	0	1	0										
M	M	/	D	D	/	Y	Y	Y	Y																						
0	8		1	2		2	0	1	0																						
City Lewiston State ME Zip Code 04243-9496 Purpose of Disbursement Payroll Taxes-FEA Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">561.48</td> </tr> </table> PAYROLL TAXES-FEA	561.48																													
561.48																															
<b>B.</b> Full Name (Last, First, Middle Initial) Advantage Payroll Service Mailing Address P.O. Box 12020 City Lewiston State ME Zip Code 04243-9496 Purpose of Disbursement Payroll Taxes-FEA Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 00812.E17545 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">709.36</td> </tr> </table> PAYROLL TAXES-FEA	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	2		2	0	1	0	709.36									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	8		1	2		2	0	1	0																						
709.36																															
<b>C.</b> Full Name (Last, First, Middle Initial) Advantage Payroll Service Mailing Address P.O. Box 12020 City Lewiston State ME Zip Code 04243-9496 Purpose of Disbursement Payroll Taxes-FEA Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 00827.E17601 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">1020.61</td> </tr> </table> PAYROLL TAXES-FEA	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	6		2	0	1	0	1020.61									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	8		2	6		2	0	1	0																						
1020.61																															

**SUBTOTAL** of Disbursements This Page (optional) .....

2291.45

**TOTAL** This Period (last page this line number only) .....

	21b		22		23		24		25		26
	27		28a		28b		28c		29	x	30b

Connecticut Republican SCC

PAYROLL TAXES-FEA

MEDICAL INSURANCE-FEA

PAYROLL-FEA

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

A.

Full Name (Last, First, Middle Initial)

Jacqueline M. Barrieau

Mailing Address 47 Soby Drive

City  
W Hartford

State  
CT

Zip Code  
06107-

Purpose of Disbursement  
Payroll-FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 00827.E17602

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

1250.00

PAYROLL-FEA

B.

Full Name (Last, First, Middle Initial)

Kayla J. Berube

Mailing Address 60 Elmwood Street

City  
Millbury

State  
MA

Zip Code  
01527-

Purpose of Disbursement  
Payroll-FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 00812.E17547

Date of Disbursement

08 / 12 / 2010

Amount of Each Disbursement this Period

1250.00

PAYROLL-FEA

C.

Full Name (Last, First, Middle Initial)

Kayla J. Berube

Mailing Address 60 Elmwood Street

City  
Millbury

State  
MA

Zip Code  
01527-

Purpose of Disbursement  
Payroll-FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 00827.E17603

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

1250.00

PAYROLL-FEA

SUBTOTAL of Disbursements This Page (optional) .....

3750.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

A.

Full Name (Last, First, Middle Initial)

Christopher C. Healy

Mailing Address 27 Dorchester Road

City Wethersfield State CT Zip Code 06109-

Purpose of Disbursement

Payroll-FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 00812.E17541

Date of Disbursement

08 / 12 / 2010

Amount of Each Disbursement this Period

3076.92

PAYROLL-FEA

B.

Full Name (Last, First, Middle Initial)

Christopher C. Healy

Mailing Address 27 Dorchester Road

City Wethersfield State CT Zip Code 06109-

Purpose of Disbursement

Payroll-FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 00827.E17597

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

3076.92

PAYROLL-FEA

C.

Full Name (Last, First, Middle Initial)

Jacob M. Herrewyn

Mailing Address 6 Patricia Lane

City Cromwell State CT Zip Code 06416-

Purpose of Disbursement

Payroll-FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 00812.E17548

Date of Disbursement

08 / 12 / 2010

Amount of Each Disbursement this Period

1250.00

PAYROLL-FEA

SUBTOTAL of Disbursements This Page (optional) .....

7403.84

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

A.

Full Name (Last, First, Middle Initial)

Jacob M. Herrewyn

Mailing Address 6 Patricia Lane

City  
Cromwell

State  
CT

Zip Code  
06416-

Purpose of Disbursement  
Payroll-FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 00827.E17604

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

1250.00

PAYROLL-FEA

B.

Full Name (Last, First, Middle Initial)

Elizabeth M. Kurantowicz

Mailing Address 244 Griswold Drive

City  
W Hartford

State  
CT

Zip Code  
06119-

Purpose of Disbursement  
Payroll-FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 00812.E17542

Date of Disbursement

08 / 12 / 2010

Amount of Each Disbursement this Period

4615.40

PAYROLL-FEA

C.

Full Name (Last, First, Middle Initial)

Elizabeth M. Kurantowicz

Mailing Address 244 Griswold Drive

City  
W Hartford

State  
CT

Zip Code  
06119-

Purpose of Disbursement  
Payroll-FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 00827.E17598

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

1615.40

PAYROLL-FEA

SUBTOTAL of Disbursements This Page (optional) .....

7480.80

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 39

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A.**

Full Name (Last, First, Middle Initial)

Erika L. Pocock

Mailing Address 1252 East Street

City  
Southington

State  
CT

Zip Code  
06489-

Purpose of Disbursement  
Payroll-FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 00812.E17549

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1250.00

PAYROLL-FEA

**B.**

Full Name (Last, First, Middle Initial)

Erika L. Pocock

Mailing Address 1252 East Street

City  
Southington

State  
CT

Zip Code  
06489-

Purpose of Disbursement  
Payroll-FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 00827.E17605

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1250.00

PAYROLL-FEA

**C.**

Full Name (Last, First, Middle Initial)

Gary M. Schaffrick

Mailing Address 515-14 Emmett Street

City  
Bristol

State  
CT

Zip Code  
06010-

Purpose of Disbursement  
Payroll-FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 00812.E17544

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

PAYROLL-FEA

**SUBTOTAL** of Disbursements This Page (optional) .....

2900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

A.

Full Name (Last, First, Middle Initial)

SMARTech

Mailing Address P.O. Box 11181

City  
Chattanooga

State  
TN

Zip Code  
37401-2181

Purpose of Disbursement  
Telephone-Polling-Non Allocable

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 00818.E17559

Date of Disbursement

08 / 17 / 2010

Amount of Each Disbursement this Period

1465.93

TELEPHONE-POLLING-NON ALL-OCABLE

B.

Full Name (Last, First, Middle Initial)

SMARTech

Mailing Address P.O. Box 11181

City  
Chattanooga

State  
TN

Zip Code  
37401-2181

Purpose of Disbursement  
Telephone-Polling-Non Allocable

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 00827.E17591

Date of Disbursement

08 / 26 / 2010

Amount of Each Disbursement this Period

859.43

TELEPHONE-POLLING-NON ALL-OCABLE

C.

Full Name (Last, First, Middle Initial)

James E. Stanley

Mailing Address 37 Westwood Drive

City  
Waterford

State  
CT

Zip Code  
06385-

Purpose of Disbursement  
Payroll-FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 00812.E17550

Date of Disbursement

08 / 12 / 2010

Amount of Each Disbursement this Period

1250.00

PAYROLL-FEA

SUBTOTAL of Disbursements This Page (optional) .....

3575.36

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A.**

Full Name (Last, First, Middle Initial)

James E. Stanley

Mailing Address 37 Westwood Drive

City  
Waterford

State  
CT

Zip Code  
06385-

Purpose of Disbursement  
Payroll-FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 00827.E17606

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1250.00

PAYROLL-FEA

**B.**

Full Name (Last, First, Middle Initial)

Joseph M. Walsh

Mailing Address 174 Lowell Street

City  
Peabody

State  
MA

Zip Code  
01960-

Purpose of Disbursement  
Payroll-FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 00818.E17560

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1179.24

PAYROLL-FEA

**C.**

Full Name (Last, First, Middle Initial)

Joseph M. Walsh

Mailing Address 174 Lowell Street

City  
Peabody

State  
MA

Zip Code  
01960-

Purpose of Disbursement  
Payroll-FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 00827.E17607

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1250.00

PAYROLL-FEA

**SUBTOTAL** of Disbursements This Page (optional) .....

3679.24

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

A.

Full Name (Last, First, Middle Initial)

Joseph M. Walsh

Mailing Address 174 Lowell Street

City  
Peabody

State  
MA

Zip Code  
01960-

Purpose of Disbursement  
Payroll-FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 00910.E17609

Date of Disbursement

/   /

Amount of Each Disbursement this Period

312.70

PAYROLL-FEA

SUBTOTAL of Disbursements This Page (optional) .....

312.70

TOTAL This Period (last page this line number only) .....

34408.46

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 27 / 39

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Connecticut Republican SCC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ATTNature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code  
Aurora IL 60507-8110

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS00910.E17610

Amount Incurred This Period

911.59

Payment This Period

0.00

Outstanding Balance at Close of This Period

911.59

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Staples IncNature of Debt (Purpose):  
General Office Supplies

Mailing Address P. O. Box 182378

City State ZIP Code  
Columbus OH 43218-2378

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS00920.E17659

Amount Incurred This Period

839.62

Payment This Period

0.00

Outstanding Balance at Close of This Period

839.62

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
FLS Connect LLCNature of Debt (Purpose):  
Telemarketing-PARTY Fundr-  
aising

Mailing Address 7300 Hudson Blvd. Suite 270

City State ZIP Code  
Saint Paul MN 55128-

Outstanding Balance Beginning This Period

3951.95

Transaction ID: LS00827.E17577

Amount Incurred This Period

0.00

Payment This Period

3951.95

Outstanding Balance at Close of This Period

0.00

**1) SUBTOTALS** This Period This Page (optional).....

1751.21

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 28 / 39

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Connecticut Republican SCC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
SMARTechNature of Debt (Purpose):  
Telephone-Polling-Non All-  
ocable

Mailing Address P.O. Box 11181

City State ZIP Code  
Chattanooga TN 37401-2181

Outstanding Balance Beginning This Period

1465.93

Transaction ID: LS00818.E17559

Amount Incurred This Period

0.00

Payment This Period

1465.93

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Grassroots TargetingNature of Debt (Purpose):  
Microtargeting

Mailing Address 814 King Street Suite 420

City State ZIP Code  
Alexandria VA 22314-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS00913.E17611

Amount Incurred This Period

42000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

42000.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

42000.00

2) **TOTALS** This Period (last page this line number only)..... ▶

43751.21

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

43751.21

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 29 / 39  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A. Full Name (Last, First, Middle Initial)**  
 Neopost

Mailing Address

P.O. Box 2255

City State Zip Code

Union City CA 94587-

Purpose of Disbursement:  
 Postage

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

221092.57

Date  M  M /  D  D /  Y  Y  Y  Y  
 08 / 03 / 2010

Transaction ID: H400812.E17526

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

52.50

197.50

250.00

**B. Full Name (Last, First, Middle Initial)**  
 Advantage Payroll Service

Mailing Address

P.O. Box 12020

City State Zip Code

Lewiston ME 04243-9496

Purpose of Disbursement:  
 Payroll Processing

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

221350.43

Date  M  M /  D  D /  Y  Y  Y  Y  
 08 / 09 / 2010

Transaction ID: H400812.E17528

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

45.76

172.15

217.91

**C. Full Name (Last, First, Middle Initial)**  
 Michael Argento

Mailing Address

726 Woodward Avenue

City State Zip Code

New Haven CT 06512-1944

Purpose of Disbursement:  
 EXPENSE REIMBURSEMENT:SEE BELOW

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

221132.52

Date  M  M /  D  D /  Y  Y  Y  Y  
 08 / 09 / 2010

Transaction ID: H400812.E17530

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

8.39

31.56

39.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

106.65

401.21

507.86

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 30 / 39  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A. Full Name (Last, First, Middle Initial)**  
 Stop & Shop

Mailing Address

Trolley Square

City State Zip Code

East Haven CT 06512-

Purpose of Disbursement:  
 General Office Supplies

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 3

**[MEMO ITEM]** General Office Supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

21.81

Date 08 / 02 / 2010

Transaction ID: H400818.E17570

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.58

17.23

21.81

**B. Full Name (Last, First, Middle Initial)**  
 Stop & Shop

Mailing Address

44 Lake Avenue Ext.

City State Zip Code

Danbury CT 06811-

Purpose of Disbursement:  
 General Office Supplies

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 3

**[MEMO ITEM]** General Office Supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1.99

Date 08 / 02 / 2010

Transaction ID: H400818.E17572

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.42

1.57

1.99

**C. Full Name (Last, First, Middle Initial)**  
 Fazio Shoe Repair

Mailing Address

216 Market Square

City State Zip Code

Newington CT 06111-

Purpose of Disbursement:  
 General Office Supplies

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 3

**[MEMO ITEM]** General Office Supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2.52

Date 08 / 02 / 2010

Transaction ID: H400818.E17571

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.53

1.99

2.52

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 31 / 39  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A. Full Name (Last, First, Middle Initial)**  
 Stop & Shop

Mailing Address

Washington Avenue

City State Zip Code  
 North Haven CT 06473-

Purpose of Disbursement:  
 General Office Supplies

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 3

**[MEMO ITEM]** General Office Supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

13.63

Date M M / D D / Y Y Y Y  
 0 8 / 0 2 / 2 0 1 0

Transaction ID: H400818.E17569

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2.86

10.77

13.63

**B. Full Name (Last, First, Middle Initial)**  
 Sarah J. Richards Clark

Mailing Address

54 Wright Road

City State Zip Code  
 Wethersfield CT 06109-

Purpose of Disbursement:  
 EXPENSE REIMBURSEMENT:SEE BELOW

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

221593.69

Date M M / D D / Y Y Y Y  
 0 8 / 0 9 / 2 0 1 0

Transaction ID: H400812.E17533

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

51.08

192.18

243.26

**C. Full Name (Last, First, Middle Initial)**  
 Staples

Mailing Address

3174 Berlin Turnpike

City State Zip Code  
 Newington CT 06111-

Purpose of Disbursement:  
 General Office Supplies

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 3

**[MEMO ITEM]** General Office Supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

86.91

Date M M / D D / Y Y Y Y  
 0 8 / 0 5 / 2 0 1 0

Transaction ID: H400818.E17573

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

18.25

68.66

86.91

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

51.08

192.18

243.26

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 32 / 39  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A. Full Name (Last, First, Middle Initial)**  
 Verizon Wireless

Mailing Address

P.O. Box 15062

City State Zip Code  
 Albany NY 12212-5062

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 3  
**[MEMO ITEM]** Telephone

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

156.35

Date M M / D D / Y Y Y Y  
 0 8 / 0 9 / 2 0 1 0

Transaction ID: H400818.E17574

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

32.83

123.52

156.35

**B. Full Name (Last, First, Middle Initial)**  
 National Innovations

Mailing Address

(formerly MLK Jr. Bus.) 321 Ellis Street

City State Zip Code  
 New Britain CT 06051-

Purpose of Disbursement:  
 Rent

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

224343.69

Date M M / D D / Y Y Y Y  
 0 8 / 0 9 / 2 0 1 0

Transaction ID: H400812.E17535

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

577.50

2172.50

2750.00

**C. Full Name (Last, First, Middle Initial)**  
 Advantage Payroll Service

Mailing Address

P.O. Box 12020

City State Zip Code  
 Lewiston ME 04243-9496

Purpose of Disbursement:  
 Payroll Taxes-Not FEA

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

227554.10

Date M M / D D / Y Y Y Y  
 0 8 / 1 2 / 2 0 1 0

Transaction ID: H400812.E17537

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

92.65

348.52

441.17

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

670.15

2521.02

3191.17

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 33 / 39  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A. Full Name (Last, First, Middle Initial)**

Michael Argento

Mailing Address

726 Woodward Avenue

City

State

Zip Code

New Haven

CT

06512-1944

Purpose of Disbursement:

Payroll-Not FEA

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

226266.77

Date

M M

/

D D

/

Y Y

Y Y

0 8

1 2

2 0

1 0

Transaction ID: H400812.E17539

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

403.85

1519.23

1923.08

**B. Full Name (Last, First, Middle Initial)**

Sarah J. Richards Clark

Mailing Address

54 Wright Road

City

State

Zip Code

Wethersfield

CT

06109-

Purpose of Disbursement:

Payroll-Not FEA

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

229284.88

Date

M M

/

D D

/

Y Y

Y Y

0 8

1 2

2 0

1 0

Transaction ID: H400812.E17540

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

363.46

1367.32

1730.78

**C. Full Name (Last, First, Middle Initial)**

Robert H. Lutts

Mailing Address

40 Brace Road

City

State

Zip Code

W Hartford

CT

06107-

Purpose of Disbursement:

Payroll-Not FEA

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

227112.93

Date

M M

/

D D

/

Y Y

Y Y

0 8

1 2

2 0

1 0

Transaction ID: H400812.E17543

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

177.69

668.47

846.16

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

945.00

3555.02

4500.02

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 34 / 39  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A. Full Name (Last, First, Middle Initial)**  
 APC

Mailing Address

6470 East Johns Crossings Suite 1

City State Zip Code

Duluth GA 30097-

Purpose of Disbursement:  
TelephoneCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

229336.92

Date 08 / 17 / 2010

Transaction ID: H400818.E17552

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10.93

41.11

52.04

**B. Full Name (Last, First, Middle Initial)**  
 Elizabeth M. Kurantowicz

Mailing Address

244 Griswold Drive

City State Zip Code

W Hartford CT 06119-

Purpose of Disbursement:  
EXPENSE REIMBURSEMENT:SEE BELOWCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

229658.25

Date 08 / 17 / 2010

Transaction ID: H400818.E17554

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

67.48

253.85

321.33

**C. Full Name (Last, First, Middle Initial)**  
 Verizon Wireless

Mailing Address

One Verizon Way

City State Zip Code

Basking Ridge NJ 07920-1097

Purpose of Disbursement:  
TelephoneCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 3

[MEMO ITEM] Telephone

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

321.33

Date 08 / 17 / 2010

Transaction ID: H400818.E17565

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

67.48

253.85

321.33

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

78.41

294.96

373.37

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 35 / 39  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A. Full Name (Last, First, Middle Initial)**  
W.B. Mason Co. Inc.

Mailing Address

P.O. Box 111

City State Zip Code  
Brockton MA 02303-0111

Purpose of Disbursement:  
General Office Supplies

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

229751.72

Date  M  M /  D  D /  Y  Y  Y  Y  
08 / 17 / 2010

Transaction ID: H400818.E17555

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.63		73.84		93.47

**B. Full Name (Last, First, Middle Initial)**  
American Copy Service Center

Mailing Address

567 Watertown Ave

City State Zip Code  
Waterbury CT 06708-

Purpose of Disbursement:  
Equipment Maintenance

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

231644.88

Date  M  M /  D  D /  Y  Y  Y  Y  
08 / 19 / 2010

Transaction ID: H400819.E17575

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
397.56		1495.60		1893.16

**C. Full Name (Last, First, Middle Initial)**  
Peerless Insurance

Mailing Address

62 Maple Avenue

City State Zip Code  
Keene NH 03431-

Purpose of Disbursement:  
Commercial Insurance

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

231818.88

Date  M  M /  D  D /  Y  Y  Y  Y  
08 / 19 / 2010

Transaction ID: H400819.E17576

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.54		137.46		174.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
453.73		1706.90		2160.63

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 36 / 39  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A. Full Name (Last, First, Middle Initial)**  
Anthem Blue Cross & Blue Shield Of Ct

 Mailing Address  
370 Bassett Road

 City State Zip Code  
North Haven CT 06473-4201

 Purpose of Disbursement:  
Medical Insurance-Not FEA
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

232845.28

 Date 

M	M
0	8

 / 

D	D
2	6

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: H400827.E17578

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

215.54

810.86

1026.40

**B. Full Name (Last, First, Middle Initial)**  
ATT

 Mailing Address  
P.O. Box 8110

 City State Zip Code  
Aurora IL 60507-8110

 Purpose of Disbursement:  
Telephone
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

236290.42

 Date 

M	M
0	8

 / 

D	D
2	6

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: H400827.E17579

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

57.94

217.96

275.90

**C. Full Name (Last, First, Middle Initial)**  
Comcast

 Mailing Address  
P.O. Box 1577

 City State Zip Code  
Newark NJ 07101-1577

 Purpose of Disbursement:  
Utilities
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

238712.69

 Date 

M	M
0	8

 / 

D	D
2	6

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: H400827.E17580

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

33.56

126.26

159.82

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

307.04

1155.08

1462.12

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 37 / 39  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A. Full Name (Last, First, Middle Initial)**  
 Dolphin Capital Corporation

Mailing Address

P.O. Box 605

City State Zip Code  
 Moberly MO 65270-0605

Purpose of Disbursement:  
 Equipment Lease

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

238552.87

Date M M / D D / Y Y Y Y  
 0 8 / 2 6 / 2 0 1 0

Transaction ID: H400827.E17581

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

28.85

108.51

137.36

**B. Full Name (Last, First, Middle Initial)**  
 Arthur W. Mocabee Jr.

Mailing Address

70 Wolcott Road P.O. Box 1943

City State Zip Code  
 Bristol CT 06011-1943

Purpose of Disbursement:  
 Mileage Reimbursement

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

238804.81

Date M M / D D / Y Y Y Y  
 0 8 / 2 7 / 2 0 1 0

Transaction ID: H400827.E17583

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

19.35

72.77

92.12

**C. Full Name (Last, First, Middle Initial)**  
 Staples Inc

Mailing Address

P. O. Box 182378

City State Zip Code  
 Columbus OH 43218-2378

Purpose of Disbursement:  
 General Office Supplies

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

238912.10

Date M M / D D / Y Y Y Y  
 0 8 / 2 7 / 2 0 1 0

Transaction ID: H400827.E17585

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

22.53

84.76

107.29

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

70.73

266.04

336.77

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 38 / 39  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A. Full Name (Last, First, Middle Initial)**  
 Advantage Payroll Service

Mailing Address

P.O. Box 12020

City	State	Zip Code
Lewiston	ME	04243-9496

Purpose of Disbursement:  
 Payroll Taxes-Not FEA

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

236684.73

Date 

M	M
0	8

 / 

D	D
2	6

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: H400827.E17593

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.81		311.50		394.31

**B. Full Name (Last, First, Middle Initial)**  
 Michael Argento

Mailing Address

726 Woodward Avenue

City	State	Zip Code
New Haven	CT	06512-1944

Purpose of Disbursement:  
 Payroll-Not FEA

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

234768.36

Date 

M	M
0	8

 / 

D	D
2	6

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: H400827.E17595

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
403.85		1519.23		1923.08

**C. Full Name (Last, First, Middle Initial)**  
 Sarah J. Richards Clark

Mailing Address

54 Wright Road

City	State	Zip Code
Wethersfield	CT	06109-

Purpose of Disbursement:  
 Payroll-Not FEA

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

238415.51

Date 

M	M
0	8

 / 

D	D
2	6

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: H400827.E17596

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
363.46		1367.32		1730.78

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
850.12		3198.05		4048.17

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 39 / 39  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Connecticut Republican SCC

**A. Full Name (Last, First, Middle Initial)**

Robert H. Lutts

Mailing Address

40 Brace Road

City

State

Zip Code

W Hartford

CT

06107-

Purpose of Disbursement:

Payroll-Not FEA

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

235614.52

Date 08 / 26 / 2010

Transaction ID: H400827.E17599

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

177.69

668.47

846.16

**B. Full Name (Last, First, Middle Initial)**

Gary M. Schaffrick

Mailing Address

515-14 Emmett Street

City

State

Zip Code

Bristol

CT

06010-

Purpose of Disbursement:

Payroll-Not FEA

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 3

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

236014.52

Date 08 / 26 / 2010

Transaction ID: H400827.E17600

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

84.00

316.00

400.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

261.69

984.47

1246.16

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

3794.60

14274.93

18069.53